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Only

FE5AN018

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED
SECRETARY OF HIS SENATE
PUBLICATION

15 FEB -3 PM 3:30

(Revised 02/2003)

1 01114		For An A	Authorized (Committee			Office Use Only
1. NAME OF COMMIT	F TEE (in full)	TYPE OR PRIN	Τ ♥	Example: If over the line		12FE4M	
American	s for Do	ug Truax					1
<u> </u>	<u>. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1</u>		<u> </u>				
ADDRESS (nu	mber and str	eet) PO Box 4808					
	k if differer						
	previously rted. (ACC)	Oak Brook	1 1 1 1			IL I	60522
2. FEC IDE	NTIFICATI	ON NUMBER ▼	CITY	A		STATE A	ZIP CODE
Cc	0546457		3. IS THIS	\mathbf{x}	NEW	AMEN	STATE ▼ DISTRICT
			REPOR	#/>3	(N) OR	(A)	
4. TYPE O	F REPOR	RT (Choose One)		•			
	terly Repor		(b) 12-Day	PRE-Election	Report for the:		
П	Anril 15 Ous	urterly Report (Q1)		Primary	(12P)	General	(12G) Runoff (12R)
				Convent	ion (12C)	Special (12S)
L	July 15 Qua	rterly Report (Q2)		r	4 / 0 0	, 	7 :_ AL -
<u> </u>	October 15	Quarterly Report (Q3)	Election	n on			in the State of
⊠ .	January 31	Year-End Report (YE)	(c) 30-Day	POST-Election	Report for the	:	
				General	(30G)	Runoff (3	OR) Special (30S)
Π -	Termination	Report (TER)		Surrenter :			
Shoull		' ' '	Election	n on		Y W Y Y Y	in the State of
		M*M / D*D /	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		A M		~ · · · · · · ·
5. Covering	Period	10 01	2014	throu	gh <u>12</u>	31	2014
certify that I	have exami	ned this Report and to	the best of m	v knowledge a	and helief it is t	nie correct an	d complete
Type or Print N				y mountage t	and belief it is i	ruc, correct arr	a complete.
Signature of Tr	reasurer	Sherry Gaskill			 	Date 01	28 2015
NOTE: Submiss	sion of false.	erroneous, or incomple	te information r	may subject the	nerson signing	this Report to t	the penalties of 2 U.S.C. §437g.
Offic	:e	The state of the s		, 505,001 1116	person aigning	and report to	
Use)]		FEC FORM 3